

1ST AVAILABLE COPY

| CLAIMS ONLY | | | | | | Application Number 10676284 | | Filing Date | | |
|---------------|----------|---------|-----------------------|---------|------------------------|---|---------------|-------------|--------|---------|
| | | | | | | Applicant(s) | | | | |
| | | | | | | May be used for additional claims or amendments | | | | |
| CLAIMS | AS FILED | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | | Indep. | Depend. | Indep. | Depend. |
| | Indep. | Depend. | Indep. | Depend. | Indep. | Depend. | | | | |
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| Total Indep. | 1 | | | | | | Total Indep. | | | |
| Total Depend. | 31 | | | | | | Total Depend. | | | |
| Total Claims | 32 | | | | | | Total Claims | | | |